



JUL 07 2006

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8) Applicant(s): Seong-Yong HWANG, et al.			Docket No. 21C-0098	
Application No. 10/720,652	Filing Date 11-24-2003	Examiner Chowdhury, Tarifur Rashid	Group Art Unit 2871	
Invention: DRIVE IC AND DISPLAY DEVICE HAVING THE SAME				
<p>Request for Continued Examination (RCE) Transmittal (1 page), Amendment Transmittal Letter (1 page), Reply to Final Office Action (11 pages) and Authorization to debit and/or credit Deposit Acct. No. 06-1130</p> <p>I hereby certify that this _____ (Identify type of correspondence)</p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax No. <u>571-273-8300</u>)</p> <p>on <u>July 7, 2006</u> (Date)</p> <p>Tammie Lanthier (Typed or Printed Name of Person Signing Certificate)</p> <p> (Signature)</p> <p>Note: Each paper must have its own certificate of mailing.</p>				

P18/REV02

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 21C-0098							
Applicant(s): Seong-Yong HWANG, et al												
Application No. 10/720,652	Filing Date 11-24-2003	Examiner Chowdhury, Tarifur Rashid	Customer No. 23413	Group Art Unit 2871	Confirmation No. 4656							
Invention: DRIVE IC AND DISPLAY DEVICE HAVING THE SAME												
<u>COMMISSIONER FOR PATENTS:</u>												
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.												
CLAIMS AS AMENDED												
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE							
TOTAL CLAIMS	25 -	26 =	0	x \$50.00	\$0.00							
INDEP. CLAIMS	4 -	4 =	0	x \$200.00	\$0.00							
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						\$0.00						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00						
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 06-1130 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.												
 _____ <i>Signature</i> James V. Merrick Reg. No. 43,801 Cantor Colburn LLP 55 Griffin Road South Bloomfield, CT 06002 Telephone: (860) 286-2929 Fax: (860) 286-0115			Dated: July 7, 2006 <table border="1" style="width:100%"><tr><td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460" [37 CFR 1.8(a)] on _____ (Date)</td></tr><tr><td colspan="2">_____ <i>Signature of Person Mailing Correspondence</i></td></tr><tr><td colspan="2">_____ <i>Typed or Printed Name of Person Mailing Correspondence</i></td></tr></table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460" [37 CFR 1.8(a)] on _____ (Date)		_____ <i>Signature of Person Mailing Correspondence</i>		_____ <i>Typed or Printed Name of Person Mailing Correspondence</i>	
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cc:												

P11LARGE/REV09